

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213503992</b>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>Cray Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX RD STE 301</b>  <b>GLEN ALLEN, VA 23060-6802</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>WA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>2/28/2013</b></p> <p>SCC ID NO: <b>F1737107</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>75,000,000</td> </tr> <tr> <td>PREF</td> <td>5,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	75,000,000	PREF	5,000,000
CLASS	AUTHORIZED							
COMMON	75,000,000							
PREF	5,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 241 18TH ST STE 610</p> <p style="text-align: center;">CITY/ST/ZIP: ARLINGTON, VA 22202</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: PETER J UNGARO  TITLE: PRESIDENT &amp; CEO  ADDRESS: 901 FIFTH AVE  STE 1000  CITY/ST/ZIP/CO: SEATTLE, WA 98164 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> <td style="width: 30%;"></td> </tr> </table>			NAME: PETER J UNGARO TITLE: PRESIDENT & CEO ADDRESS: 901 FIFTH AVE STE 1000 CITY/ST/ZIP/CO: SEATTLE, WA 98164	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR			
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NAME:	BRIAN C HENRY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP AND CFO		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	MARGARET A WILLIAMS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	901 FIFTH AVE STE 1000		
CITY/ST/ZIP/CO:	SEATTLE, WA 98164		
NAME:	WILLIAM C BLAKE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	901 FIFTH AVE STE 1000		
CITY/ST/ZIP/CO:	SEATTLE, WA 98164		
NAME:	JOHN B JONES, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	STEPHEN C KIELY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	FRANK L LEDERMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	SALLY G NARODICK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	DANIEL C REGIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	STEPHEN C RICHARDS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		
NAME:	ARVIND PARTHASARATHI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	901 FIFTH AVE		
CITY/ST/ZIP/CO:	STE 1000 SEATTLE, WA 98164		

NAME:	GEUN-BUM (DANIEL) KIM	<input checked="checked" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	901 FIFTH AVE		
	STE 1000		
CITY/ST/ZIP/CO:	SEATTLE, WA 98164		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ MICHAEL C PIRAINO	MICHAEL C PIRAINO, VP GEN	1/25/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	COUNSEL	DATE	
	PRINTED NAME AND CORPORATE TITLE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			